

County: Walworth  
FAIRHAVEN CORPORATION  
435 STARIN ROAD

Facility ID: 3310

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WHITEWATER 53190 Phone:(262) 473-2140  
Operated from 1/1 To 12/31 Days of Operation: 365  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/03): 84  
Total Licensed Bed Capacity (12/31/03): 84  
Number of Residents on 12/31/03: 80

Ownership: Non-Profit Corporation  
Highest Level License: Skilled  
Operate in Conjunction with CBRF? Yes  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 80

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		21.3
Supp. Home Care-Personal Care	Yes					1 - 4 Years		50.0
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	1.3	More Than 4 Years		13.8
Day Services	No	Mental Illness (Org./Psy)	28.8	65 - 74	3.8			-----
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	25.0			85.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	51.3	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.3	95 & Over	18.8	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	Yes	Fractures	15.0		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	18.8	65 & Over	98.8	-----		
Transportation	Yes	Cerebrovascular	16.3		-----	RNs		9.8
Referral Service	No	Diabetes	6.3	Gender	%	LPNs		10.7
Other Services	No	Respiratory	2.5		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	11.3	Male	18.8	Aides, & Orderlies		
Mentally Ill	No		-----	Female	81.3			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

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#### Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total	%
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Resi- dents	Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	1	2.6	203	0	0.0	0	0	0.0	0	1
Skilled Care	3	100.0	305	31	81.6	116	0	0.0	0	34	87.2	179	0	0.0	0	0	0.0	0	68
Intermediate	---	---	---	7	18.4	97	0	0.0	0	4	10.3	169	0	0.0	0	0	0.0	0	11
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Total	3	100.0		38	100.0		0	0.0		39	100.0		0	0.0		0	0.0	80	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	15.9	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	5.0	53.8	41.3	80
Other Nursing Homes	1.8	Dressing	20.0	52.5	27.5	80
Acute Care Hospitals	74.3	Transferring	27.5	48.8	23.8	80
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	18.8	46.3	35.0	80
Rehabilitation Hospitals	0.0	Eating	77.5	11.3	11.3	80
Other Locations	8.0	*****				
Total Number of Admissions	113	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	3.8	Receiving Respiratory Care		6.3
Private Home/No Home Health	30.4	Occ/Freq. Incontinent of Bladder	62.5	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	7.5	Receiving Suctioning		0.0
Other Nursing Homes	0.0			Receiving Ostomy Care		0.0
Acute Care Hospitals	29.6	Mobility		Receiving Tube Feeding		1.3
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets		23.8
Rehabilitation Hospitals	0.0					
Other Locations	11.3	Skin Care		Other Resident Characteristics		
Deaths	28.7	With Pressure Sores	12.5	Have Advance Directives		97.5
Total Number of Discharges		With Rashes	15.0	Medications		
(Including Deaths)	115			Receiving Psychoactive Drugs		65.0

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Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Nonprofit %	Peer Group Ratio	Bed Size: 50-99 %	Peer Group Ratio	Licensure: Skilled %	Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95.2	94.0	1.01	88.0	1.08	88.1	1.08	87.4	1.09
Current Residents from In-County	63.8	77.2	0.83	72.9	0.87	69.7	0.92	76.7	0.83
Admissions from In-County, Still Residing	19.5	23.9	0.81	20.1	0.97	21.4	0.91	19.6	0.99
Admissions/Average Daily Census	141.3	101.9	1.39	129.5	1.09	109.6	1.29	141.3	1.00
Discharges/Average Daily Census	143.8	102.4	1.40	130.3	1.10	111.3	1.29	142.5	1.01
Discharges To Private Residence/Average Daily Census	43.8	39.2	1.12	52.2	0.84	42.9	1.02	61.6	0.71
Residents Receiving Skilled Care	86.3	96.3	0.90	93.7	0.92	92.4	0.93	88.1	0.98
Residents Aged 65 and Older	98.8	97.2	1.02	94.2	1.05	93.1	1.06	87.8	1.13
Title 19 (Medicaid) Funded Residents	47.5	64.2	0.74	66.3	0.72	68.8	0.69	65.9	0.72
Private Pay Funded Residents	48.8	25.9	1.88	21.6	2.26	20.5	2.37	21.0	2.33
Developmentally Disabled Residents	0.0	0.5	0.00	0.5	0.00	0.5	0.00	6.5	0.00
Mentally Ill Residents	28.8	38.5	0.75	36.2	0.79	38.2	0.75	33.6	0.86
General Medical Service Residents	11.3	20.1	0.56	21.5	0.52	21.9	0.51	20.6	0.55
Impaired ADL (Mean)	49.5	51.0	0.97	48.4	1.02	48.0	1.03	49.4	1.00
Psychological Problems	65.0	53.0	1.23	53.4	1.22	54.9	1.18	57.4	1.13
Nursing Care Required (Mean)	7.3	7.7	0.95	6.9	1.06	7.3	1.01	7.3	1.00